EXECUTIVE COUNCIL OF IOWA

AGENDA .

SEPTEMBER 12, 2011

- 1. Introduction of Attendees
- 2. Approval of minutes of meeting held September 6, 2011
- 3. Payment of Cost Items Page 1
- 4. Renewal Memberships Page 2 TAB #s 1, 2 and 3

3. Payment of Cost Items

A.	Coppola, McConville, Coppola, Hockenberg & Scalise, P.C\$118.20 2100 Westown Parkway, Suite 210 West Des Moines, IA 50265-1539 Campaign Contributions from Fort Dodge Gambling Interests to Governor Culver
	Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment.
В.	Simmons Perrine Moyer Bergman PLC\$38,397.18 115 Third Street SE, Suite 1200 Cedar Rapids, IA 52402 Tobacco Settlement Authority
	Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of the Tobacco Settlement Authority.
C.	Davis, Brown, Koehn, Shors & Roberts, P.C
	Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of the Iowa Economic Development Authority.
D.	Davis, Brown, Koehn, Shors & Roberts, P.C
	Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of the Iowa Economic Development Authority.

4. Renewal Memberships

A. Human Services in National Association of State Mental Health Program Directors in the amount of \$10,840.00 for July 1, 2011 - June 30, 2012. (Previous amount was \$10,840.00.) Other agencies: No: Funding Source: State General Fund

TAB # 1

- B. Iowa Finance Authority in Mortgage Bankers Association in the amount of \$1,220.00 for October 1, 2011 September 30, 2012. (Previous amount was \$1,201.00.) Other agencies: No: Funding Source: Other Funds: Self-funded TAB # 2
- C. IPERS in Government Finance Officers Association (GFOA) in the amount of \$1,205.00 for August 1, 2011 - July 31, 2012. (Previous amount was \$1,205.00.) Other agencies: Yes: Auditor of State, Revenue, DAS, and Treasurer of State Funding Source: Other Funds: IPERS Trust Fund TAB # 3
- D. Vocational Rehabilitation in Dubuque Area Chamber in the amount of \$183.00 for September 1, 2011 August 31, 2012. (Previous amount was \$198.00.) Other agencies: Yes: Iowa Workforce Development. Funding Source: State General Fund: 21.3%; Federal Funds: 78.7%
- E. Vocational Rehabilitation in Ottumwa Area Chamber of Commerce in the amount of \$215.00 for October 1, 2011 September 30, 2012. (Previous amount was \$220.00.) Other agencies: Yes: Iowa Workforce Development. Funding Source: State General Fund: 21.3%; Federal Funds: 78.7%

Executive Council of Iowa

Capitol Building Des Moines, Iowa 50319 Phone: 515 281-5368 FAX: 515 281-7562

TAB # 1

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP:	DHS/MHDS	
NAME OF ORGANIZATION: National Association of	State Mental Health Program Dire	ctors
NEW MEMBERSHIP RENEWAL _X_		(7-1-11/6-30-12) (Beginning and ending dates)
),840.00	
Funding Source: State General Fund \square Federal Funds \square Other Funds \square If Renewal, previous year amount. $\$$ 10	Other State Funds \Box	
Federal Funds Other Funds	2010.00	
•		
DO OTHER DEPARTMENTS BELONG TO THIS	S ORGANIZATION? \Box Yes,	K No
If yes, please list:		
Please describe why your department should	ld have an additional mer	nbership
WILL THIS MEMBERSHIP REQUIRE AND PAY If yes, list the anticipated number of trips i		
DESCRIBE WHY THIS MEMBERSHIP IS IMPO	RTANT TO THE WORK OF	YOUR DEPARTMENT:
It allows membership to the national association tha authorities in the USA. NASMHPD represents view national organizations. NASMHPD plans and hosts assistance and training to states to ensure their according to the practices and helps translate recommendations from	s and concerns to Congress, for annual membership meetings ess to best practices, knowleds	ederal agencies and other , and provides technical ge on evidenced-based
DESCRIBE HOW MEMBERSHIP IN THIS ORG THE STATE OF IOWA.	ANIZATION WILL BENEFIT	THE TAXPAYERS OF
It will allow the State of Iowa to use as a resource of	n keeping current at the Nation	al level.
DESCRIBE THE FREQUENCY AND TYPE OF OF HAVE WITH THIS ORGANIZATION: This organ identification of best practices as requested by DHS	nization will assist with data an	alysis, training and
Requested by: Charles		7-29-11
(Department Head Signature)Charles M. Palmer	, ,	
Phone: 281.8580 / Karalyn Kuhns-Interim	x faula com 8.17	2-//
	<i>'</i>	
DOM: Approval Disapproval		
Signature Seur France	Date	9/2/11
o so		
Wilney Wilney	Rick Fox 1. 7 / 17/1 BA – 401-5700-2810-301	
Mombarshin Room 42400	211 101 0100 2010 001	
Membership Form 42400		July 2009

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REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Iowa Finance Authority	
NAME OF ORGANIZATION Mortgage Bankers Association	
NEW MEMBERSHIP RENEWAL _X MEMBERSHIP PERIOD.	: 10/1/2011-9/30/2012 (Beginning and ending dates)
MEMBERSHIP FEE OR DUES AMOUNT \$ 1220.00	
Funding Source: State General Fund \Box Other State Funds \Box Federal Funds \Box Other Funds X IFA is self funded	
If Renewal, previous year amount. \$ 1201	
DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? \square Yes X No If yes, please list:	na William (1995) Tana ataun 1986
Please describe why your department should have an additional membership	
WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL. If yes, list the anticipated number of trips per year and their purpose:	Yes X No
DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOU	R DEPARTMENTS (#77) 17 1 1 1 1
IFA FirstHome and FirstHome Plus require current information from credible industrates properly.	ry rates in order to set interest
DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT TH STATE OF IOWA.	E TAXPAYERS OF THE
IFA interest rates are set to provide low interest mortgage loans to Iowans and to se stream of current information from mortgage industry to stay ahead of the market	
DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOU HAVE WITH THIS ORGANIZATION: weekly via e-mail and/or phone.	UR DEPARTMENT TO
Requested by: hand fame Date: Date:	8/26/11
Phone: 725-4900 / E-mail:	Dave . Jamison@ 1000, 30
Membership Form 42400	F) 161
DOM: Approval Disapproval D	70 = 101/2009
Signature Date	8/29/12

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REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: IPERS	
NAME OF ORGANIZATION: Government Finance Officers Association (GFOA)	
NEW MEMBERSHIP RENEWAL _X MEMBERSHIP PERIOD: 08/01/11 thru 07/31/12 (Beginning and ending da	
MEMBERSHIP FEE OR DUES AMOUNT \$ 1,205.00	
Funding Other Funds100 % IPERS Trust Fund If Renewal, previous year amount. \$ 1,205.00 DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? Yes	
If yes, please list: Auditor of State, Revenue & Finance, Department of Administrative Services,	
and the Treasurer's Office.	
Please describe why your department should have an additional membership N/A	
WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? No If yes, list the anticipated number of trips per year and their purpose:	
DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.	
As a member of GFOA, we receive current information on issues and challenges that government finance practitioners face today.	
DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.	
This department is striving to make wise use of public funds, and is recognized by the public by being financially responsible. This organization provides materials regarding Government Accounting Standards Board changes and training opportunities relevant to current financial practices in government. This membership also enables IPERS to be eligible to receive the GFOA Certification of Achievement for Financial Reporting for the Comprehensive Annual Financial Report.	
DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: We will receive the twice-monthly newsletters and a bimonthly publication, entitled "Government Finance Review." We will also receive documents on publications and software purchases, training, annual conference registration fees, and award program application fees. Additionally, we are provided with a network of technical assistance and opportunities to serve on policy-making, peer support, and recognition committees.	
Requested by: On Market Date: 7-7-2011 (Department Head Signature)	_
Phone: 281-0070	
DOM: Approval Disapproval Signature Date 8/31/1/	